



STATE OF WASHINGTON
**APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT**

For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF
ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.)

- ☐ Change purpose(s) of use
☐ Add purpose(s) of use
☐ Change point(s) of diversion/withdrawal
☐ Add point(s) of diversion/withdrawal
☒ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: Application for Change of an Existing Water Right

FOR OFFICE USE ONLY	
CHANGE No. <u>CS4-0173CTCLsb30</u>	WRIA <u>37</u>
DATE ACCEPTED <u>09/10/09</u>	BY <u>[Signature]</u>
FEE \$ <u>50.00</u>	REC'D <u>07/01/2009</u>
CHECK No. <u>[Checkmark]</u>	
ECY Coding: 001-002-WR10285-000011	
SEPA: <input type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME <u>Tim Logan</u>	PHONE NO. <u>(509) 967-5980</u>	FAX NO. <u>()</u>
ADDRESS <u>91034 Northstar PRNE</u>		
CITY <u>West Richland</u>	STATE <u>WA</u>	ZIP CODE <u>99353</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE)		
PHONE NO. <u>()</u>		
FAX NO. <u>()</u>		
ADDRESS		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <u>00173</u>	RECORDED NAME(S) <u>Dawson transfer to Logan</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

COURT CLAIM 0173
SUB 30 HAWFORD

CS4-0173CTCLsb30 @ 8

FOR OFFICE USE ONLY			
APP. NO. _____	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Yakima River								
350 ft south and 100 ft east of the center section 3, being within Gov lot 2				3	10N	27		

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Yakima River								
Approx 25 ft north of southern property boundary		SE	NE	14	10N	27E	1-1407-401-1597-003	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☐ YES ☒ NO PROPOSED: ☒ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 115 acres	2.3 cfs	633	March 1 through Oct, each year

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 5 acres	35 gmp	27.5	March 1 through Oct, each year

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Government Lots 1, 4, 5, and 8 and the SE 1/4 NE 1/4 of Section 14, T. 10 N., R. 27 E.W.M., except roads and canal rights of way and except that portion of Government Lot 1 and the SE 1/4 NE 1/4 of said section lying easterly of the Horn Rapids Corporation Canal.							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
SE	NE	14	10N	27E	Benton		633
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO - IF NO, PROVIDE OWNER(S) NAME:							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Section 14, T 10N, R 27 E, W.M., Benton County WA							
Lot 3, Short Plat No. 1597, according to the Survey thereof recorded under Auditor's File No. 87-4817, records of the Benton County, WA.							
Parcel No.: 1-1407-401-1597-003							
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		14	10N	27E	Benton	1-1407-401-1597-	5

						003	
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?	
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

This property was purchased in June 2007 from Fred and Donna Brockman. A flow meter was installed prior to use per North Yakima Conservation District.
IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.


(Applicant)

6/27/09
(Date)

(Water Right Holder)

/ /
(Date)

(Land Owner(s) of Existing Place of Use)

/ /
(Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
- ☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
- ☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____